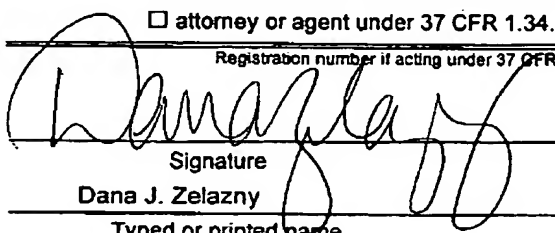


F&B (08-05) SB/22 (12-04)

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 17310 - 281350	RECEIVED CENTRAL FAX CENTER MAY 04 2006																								
In re Application of HRYPHORY T. KOBIA et al.																											
Application Number 10/687,158		Filed October 16, 2003																									
For METHOD OF LASER CLEANING SURFACES ON A HEAD SUSPENSION																											
Art Unit 1746		Examiner CHAUDHRY, Saeed T																									
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table><thead><tr><th></th><th><u>Fee</u></th><th><u>Small Entity Fee</u></th><th></th></tr></thead><tbody><tr><td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$120</td><td>\$60</td><td>\$ 120</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$450</td><td>\$225</td><td></td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$1020</td><td>\$510</td><td></td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$1590</td><td>\$795</td><td></td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$2160</td><td>\$1080</td><td></td></tr></tbody></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 06-0029. I have enclosed a duplicate copy of this sheet.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number 58,406 <input type="checkbox"/> attorney or agent under 37 CFR 1.34.</p> <p>Registration number if acting under 37 CFR 1.34. _____</p> <p> _____ Signature Dana J. Zelazny _____ Typed or printed name</p> <p>_____ Date May 4, 2006 _____ 612-766-8442 _____ Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of 1 forms are submitted.</p>					<u>Fee</u>	<u>Small Entity Fee</u>		<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225		<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510		<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795		<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	
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<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080																									

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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02 FC:1251

120.00 OP

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